



REQUEST FOR PUBLIC RECORDS

RECEIVED
AUG 08 2018
CITY OF MARYSVILLE

Name of Requestor: Joseph Phillips
Address: PO Box 2536 City: Everett State: WA Zip: 98213
Phone: 425-220-1721 Email Address: wizard@cwamail.net
Location/Department of Record (If Known): Traffic
Title and Approximate Date of Record: Feb. 17, 2018
Case/Record/Parcel # (If Known): Case # 2018-22247

Please describe the records you are requesting and any additional information that will help us locate them for you as quickly as possible. Failure to provide sufficient information to identify the records may cause delay in processing your request.

I would like to request the traffic light sequence and timing for the intersection
on 116th St. NE, block no. 3100, at I-5 Overpass. Date is Feb 17, 2018
and time is about 18:27.

If I request copies to be made, I understand there is a charge of \$.15 for single-sided copies on 8.5 x 11 or 8.5 x 14 paper. Other sized copies, maps and media are priced at actual cost incurred by the City. The cost for mailing will also be charged to the requestor. For large or costly requests, a deposit may be required in advance. **If requesting Police Records, please send directly to the Police Department at 1635 Grove St. Marysville WA 98270 or fax to 360-659-7667**

- ☒ I wish to have copies of the records indicated above provided and will pick them up, reproduction fee will apply.
☐ I wish to have copies of the records indicated above provided and mailed to me, reproduction and postage fee will apply (prepayment may be required).
☐ I wish to make an appointment to review the records indicated above before copies are made.

I realize that requesting records and not paying for the associated costs may mean that I must pay for them before the next request will be released.

I understand that secondary dissemination of this information is prohibited unless in compliance with RCW 10.97 and RCW 43.56. Additionally, I certify that any lists of individuals obtained through this request for public records will not be used for commercial purposes per RCW 42.56.070(9).

X Signature: [Signature] Date: 8/8/18

For Office Use Only

Received by: Tina Brock Date: 8/8/18 Tracking #: _____
Request Received Via: ☐ Phone ☐ Fax ☒ In Person ☐ Letter ☐ E-mail
5 Day Letter Sent: _____ Notification Letter Sent: _____
Date Request Completed: _____ Processed by: _____ Time Spent: _____
Fee: _____ Receipt Number: _____

City of Marysville City Clerk Division, 1049 State Ave, Marysville, WA 98270
Ph: 360-363-8000, Fax: 360-363-8042